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January 31, 2017

FILED VIA ECFS

Marlene H. Dortch, Secretary Federal Communications Commission 445 12th Street, SW, Room TW-B204 Washington, D.C. 20554

Re: FCC Form 555 Annual Lifeline Report and Certification WC Docket No. 14-171

Dear Ms. Dortch:

Enclosed is the FCC Form 555 Annual Lifeline Report and Certification on behalf of SI Wireless, LLC for Kentucky, SAC 269036.

This was filed via e-mail with the Universal Service Administrative Company on January 31, 2017.

Please contact the undersigned if any questions arise.

Respectfully submitted,

Steven M. Chernoff

Attorney for SI Wireless, LLC

Encl.

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

269036		143040856			
Study Area Code (SAC)	Service Provider Identification Number (SPIN)			
	~	rtification form for each SAC through which it provides Lifeline service).			
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,			
2016	KY	SI Wireless, LLC			
Recertification Year	State	ETC Name			
MobileNation		N/A			
DBA, Marketing, or Ot	her Branding Name	Holding Company Name			
(If same as ETC name, list "N	/A" Do <u>not</u> leave blank)	(If same as ETC name, list "N/A" Do not leave blank)			
		,			
D 41 **	1 AMP - 1 TOP -	X7			
Does the reporting comp	any have affiliated ETCs?	Yes No No			
Provide a list of all ETCs that a	re affiliated with the reporting FTC	using page 4 and additional sheets if necessary. Affiliation shall be			
determined in accordance with L	Section 3(2) of the Communications A	lct. That Section defines "affiliate" as "a person that (directly or indirectly)			
	ontrolled by, or is under common own	nership or control with, another person." 47 U.S.C. § 153(2). See also 47			
C.F.R. § 76.1200.					
Affiliated ETC's SAC		Affiliated ETC's Name			
299025		SI Wireless, LLC			
For purposes of this filin	a an officer is an occupant	of a position listed in the article of incorporation, articles of			
		a person who occupies a position specified in the corporate by-			
		resident, vice president for operations, vice president for finance,			
		er is a sole proprietorship, the owner must sign the certification.			
computation, treasurer, or a	comparable position. If the me	is a sole proprietorship, the owner must sign the certification.			
Section 1: Initial Cer	rtification All ETCs must complete t	his section			
I certify that the company l	isted above has certification pro	ocedures in place to:			
A) Raviass income and are	oram based aligibility documer	station prior to enrolling a consumer in the Lifeline program and			
A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and					
that, to the best of my knowledge, the company was presented with documentation of each consumer's household					
income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or					
B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state					
B) Confirm consumer elic	pibility by relying upon access	s to a state database and/or notice of eligibility from the state			
	gibility by relying upon access rior to enrolling a consumer in				
Lifeline administrator p	rior to enrolling a consumer in				
Lifeline administrator p	rior to enrolling a consumer in	the Lifeline program.			
Lifeline administrator p	rior to enrolling a consumer in	the Lifeline program.			

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-cnrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
850	0	205	324	321

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \mathbf{-} \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
321	211	110	0	110

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial <u>UB</u>

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

		ė		
(List database or name of administrator here)				
Results are provided in the chart above in Blo	ocks K through L.	I am an officer	of the company	named above. I am
authorized to make this certification for the				
SAC listed above.				
Initial				
	OR			

C) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	$\mathbf{N} = (\mathbf{J} + \mathbf{L})$	$\mathbf{O} = ((\mathbf{N} \div \mathbf{M}) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-cnrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
321	110	34.27%

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes 🔼 No 🔲

If yes, record the number of subscribers de-enrolled for non-usage by month in Block ${\it Q}$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	29
April	40
May	34
June	31
July	_ 25
August	27
September	27
October	35
November	
December	6
Total Subscribers	280

Signature Block

By signing b	oelow, I co	ertify tha	t the	company	listed a	bove is	in co	mpliance	with	all fed	eral	Lifeline	certit	fication
procedures.	I am an	officer of	f the	company	named	above.	I am	authoriz	ed to	make	this	certifica	tion	for the
Study Area (Code (SA	C) listed	above	ð.										

stady Thea code (SITE) hoted acove.	
Signed,	
hall the	Michael Beehn, COO
Signature of Officer	Printed Name and Title of Officer
mbéehn@mymobilenation.com	1/31/17
Email Address of Officer Barbara Bartley	Date 731-602-4921
Person Completing This Certification Form	Contact Phone Number

Affiliated ETCs

SAC	Name
	1